

FIRST REGULAR SESSION
[P E R F E C T E D]
SENATE COMMITTEE SUBSTITUTE FOR
SENATE BILL NO. 530
94TH GENERAL ASSEMBLY

Reported from the Committee on Seniors, Families and Public Health, March 15, 2007, with recommendation that the Senate Committee Substitute do pass and be placed on the Consent Calendar.

Senate Committee Substitute adopted March 29, 2007.

Taken up March 29, 2007. Read 3rd time and placed upon its final passage; bill passed.

TERRY L. SPIELER, Secretary.

1527S.02P

AN ACT

To repeal section 198.086, RSMo, and to enact in lieu thereof one new section relating to the Alzheimer's demonstration project.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Section 198.086, RSMo, is repealed and one new section
2 enacted in lieu thereof, to be known as section 198.086, to read as follows:

198.086. 1. The department of health and senior services shall develop
2 and implement a demonstration project designed to establish a licensure category
3 for health care facilities that wish to provide treatment to persons with
4 Alzheimer's disease or Alzheimer's-related dementia. The division shall also:

5 (1) Inform potential providers of the demonstration project and seek
6 letters of intent;

7 (2) Review letters of intent and select provider organizations to
8 participate in the demonstration project. Ten such organizations may develop
9 such projects using an existing license and additional organizations shall be
10 newly licensed facilities with no more than thirty beds per project. One
11 demonstration project shall be at a stand-alone facility of no more than one
12 hundred twenty beds designed and operated exclusively for the care of residents
13 with Alzheimer's disease or dementia within a county of the first classification
14 with a charter form of government with a population over nine hundred thousand.
15 A total of not more than three hundred beds may be newly licensed through the
16 demonstration projects. All projects shall maintain their pilot status until a

17 complete evaluation is completed by the division of aging, in conjunction with a
18 qualified Missouri school or university, and a written determination is made from
19 such evaluation that the pilot project is successful;

20 (3) Monitor the participants' compliance with the criteria established in
21 this section;

22 (4) Recommend legislation regarding the licensure of dementia-specific
23 residential care based on the results of the demonstration project; and

24 (5) Submit a report regarding the division's activities and
25 recommendations for administrative or legislative action on or before November
26 fifteenth of each year to the governor, the president pro tem of the senate and the
27 speaker of the house of representatives.

28 2. The director of the division of aging shall:

29 (1) Develop a reimbursement methodology to reasonably and adequately
30 compensate the pilot projects for the costs of operation of the project, and require
31 the filing of annual cost reports by each participating facility which shall include,
32 but not be limited to, the cost equivalent of unpaid volunteer or donated labor;

33 (2) Process the license applications of project participants;

34 (3) Monitor each participant to assure its compliance with the
35 requirements and that the life, health and safety of residents are assured;

36 (4) Require each participating facility to complete a minimum data set
37 form for each resident occupying a pilot bed;

38 (5) Require the division of aging to assign a single team of the same
39 surveyors to inspect and survey all participating facilities at least twice a year
40 for the entire period of the project; and

41 (6) Submit to the president pro tem of the senate and speaker of the house
42 of representatives copies of any statements of deficiencies, plans of correction and
43 complaint investigation reports applying to project participants.

44 3. Project participants shall:

45 (1) Be licensed by the division of aging;

46 (2) Provide care only to persons who have been diagnosed with
47 Alzheimer's disease or Alzheimer's-related dementia;

48 (3) Have buildings and furnishings that are designed to provide for the
49 resident's safety. Facilities shall have indoor and outdoor activity areas, and
50 electronically controlled exits from the buildings and grounds to allow residents
51 the ability to explore while preventing them from exiting the facility's grounds
52 unattended;

53 (4) Be staffed twenty-four hours a day by the appropriate number and
54 type of personnel necessary for the proper care of residents and upkeep of the
55 facility;

56 (5) Conduct special staff training relating to the needs, care and safety of
57 persons with Alzheimer's disease or Alzheimer's-related dementia within the first
58 thirty days of employment;

59 (6) Utilize personal electronic monitoring devices for any resident whose
60 physician recommends use of such device;

61 (7) Permit the resident's physician, in consultation with the family
62 members or health care advocates of the resident, to determine whether the
63 facility meets the needs of the resident;

64 (8) Be equipped with an automatic sprinkler system, in compliance with
65 the National Fire Protection Association Code 13 or National Fire Protection
66 Association Code 13R, and an automated fire alarm system and smoke barriers
67 in compliance with the 1997 Life Safety Codes for Existing Health Care
68 Occupancy; and

69 (9) Implement a social model for the residential environment rather than
70 an institutional medical model.

71 4. For purposes of this section, "health care facilities for persons with
72 Alzheimer's disease or Alzheimer's-related dementia" means facilities that are
73 specifically designed and operated to provide elderly individuals who have chronic
74 confusion or dementia illness, or both, with a safe, structured but flexible
75 environment that encourages physical activity through a well-developed
76 recreational and aging-in-place and activity program. Such program shall
77 continually strive to promote the highest practicable physical and mental abilities
78 and functioning of each resident.

79 5. Nothing in this section shall be construed to prohibit project
80 participants from accommodating a family member or other caregiver from
81 residing with the resident in accordance with all life, health, and safety standards
82 of the facility.

83 **6. The provisions of subsections 1 to 5 of this section shall expire**
84 **August 28, 2007, except that, as provided in this section, demonstration**
85 **projects authorized prior to August 28, 2007, whether or not**
86 **constructed, shall continue to be exempt from sections 197.300 to**
87 **197.366, RSMo. Such demonstration projects, and the facilities they**
88 **represent, should they seek expansion beyond the approved number of**

89 licensed beds, shall operate in compliance with sections 197.300 to
90 197.366, RSMo, with respect to expansion.

91 7. Demonstration projects authorized under this section but
92 which are neither constructed nor admitting residents as of August 28,
93 2007, shall not be exempt from sections 197.300 to 197.366, RSMo, unless
94 such projects formally declare in writing to the department, not later
95 than December 1, 2007, their intention to commence construction and
96 provide dementia-related care for Alzheimer's residents and actually
97 commence providing dementia-related care for Alzheimer's residents
98 in accordance with department standards prior to August 28, 2008.

Unofficial ✓

Bill

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